General Information

Murray City requires that a valid business license be held by anyone conducting business within Murray City. "Business" means and includes every craft, trade, occupation, profession or activity pursued for gain or profit excluding, however, services rendered by an employer.

Non-profit, charitable, governmental, insurance agencies and real estate agents are also required to obtain a business license although they may be exempt from license fees.

Each business location will need a separate license. Temporary businesses and seasonal businesses are also required to obtain licenses and permits.

Licenses are not transferable from address to address, or from owner to owner. Any change of location, ownership, or corporate information requires a new application to be submitted. Minor changes such as mailing address may be submitted without application.

Re-application notices are mailed out on the first of the month in which the license expires. In order to avoid penalty fees, the re-application form and payment must be received in our office prior to the expiration date. We do not accept post marks as timely receipts and cannot be responsible for lost or misdirected mail. Responsibility of renewal is total responsibility of the licensee. Failure to receive notices does not excuse this responsibility.

Murray City requires that a written notice be submitted if a business has moved out of the City or is no longer conducting business. Please note that license fees are non refundable.

Application Information

Before submitting an application to the City, all State and local requirements must be met. Please bring in verification of all State requirements when submitting your application.

The average business license processing time is 7 - 10 business days. This time may vary in circumstances where a conditional use, Health Department approval, etc. is needed. Murray City does not offer interim licensing. Please be aware that you must have your business license issued prior to opening/operating. If you are still under construction, or your projected opening date is more than 3 weeks out, please do not turn in your application any sooner than 3 weeks prior to opening.

Fees for licenses vary according to number of employees, vehicles and classifications. Please refer to the fee schedule page included with your application for details. Fees are due at the time of submitting an application. License fees are non refundable should a license not be approved. Fees are also required for change of address and are not prorated.

Once an application is submitted, approvals and/or inspections are required by Murray City Fire Department, Murray City Zoning Department and Murray City Code Enforcement. Businesses may also need to complete inspections by the Salt Lake County Health Department or other applicable agencies. When all applicable departments have approved the application, a business license will be issued.

BUSINESS LICENSE APPLICATION CHECKLIST

The following must be included with your application at the time it is submitted. We cannot accept applications until all State and local requirements are met. A list of State agencies with addresses and phone #'s are included with your application (New Business Compliance Information).

0\	wner/Corporate Officer List (Corporations, LLC & Partnerships)				
Fe	Federal Tax ID/EIN # (Sole proprietors, with no employees can use their social security number in lieu of an EIN #)				
Sa	Sales Tax # (All businesses responsible for collection of sales & use tax. Must list Murray address as an outlet)				
Ut	Utah Department of Commerce registration of business name/corporation verification				
St	ate License if applicable, from the Utah Division of Occupational and	d Professional Licensing - DOPL			
	usiness Responsible Form (Murray City Police Department)	2			
		offices on mall kindles			
	re Department Business Inspection Information sheet (N/A for home	offices of mail klosks)			
Ind	dustrial Discharge Questionnaire (All businesses except office only)				
Murray	ond (Murray Municipal Code 5.04.230) An applicant engaged in the City with an original bond in the amount indicated indemnifying the coshow Murray City Corporation as the obligee. Auctioneers, Auction Houses Pawnbrokers; secondhand dealers; secondhand precious metal dealers Security systems and equipment; alarm sales/installation Excavation in right of way Sexually oriented business Locksmith Firearms Dealer, Gunsmith Massage Establishment (not owned by massage therapist) Moving and Storage Cable; other home installation				
*Surety informat	bonds are obtained through various insurance agencies. Please ch	eck with your insurance company for additional			
iiiioiiiiai	uo11.				

____ Background investigation (Murray City Municipal Code 5.04.260) A background check and personal data sheet is required on each owner, officer and manager for the following list of business classifications.

- Pawnbrokers, secondhand dealers, swap meets, flea markets
- Private investigators and detectives
- Gun Shops
- Coupon book sales
- Beer/Alcohol sales (retail stores, lounges, taverns, fairgrounds, 1 day gatherings, cabarets, private clubs, restaurants)
- Sexually oriented businesses
- Coin dealers
- Massage establishments (including owner, operator, manager, managing employee or any other employee who
 is not, and who is not required to be, licensed by the state division of occupational and professional licensing as a
 massage therapist or apprentice).
- Arcades
- Establishments which restrict admittance based solely on age

^{*}Background investigations (FBI checks) can be obtained through BCI, 801-965-4445, 3888 W 5400 S, West Valley City, Utah

NEW BUSINESS COMPLIANCE INFORMATION

NOTE: This list may not be complete, depending upon your business type, in some cases some or none may apply. Please contact the agencies listed for help in deciding which items will apply to your specific business situation. It is the responsibility of the owner/manager to seek out any other governmental agencies involved in the regulations of their business. Please keep in mind that this is a guideline only.

STATE TAX INFORMATION

For information related to Income Tax, State Sales Tax, Use Taxes and other applicable state taxes, contact the State Tax Commission.

210 N. 1950 W., Salt Lake City, Utah 84134

Phone: 801-297-2200

FEDERAL EMPLOYER'S TAX ID NUMBER & FEDERAL TAX INFORMATION

Contact the IRS for information related to income, excise, self employment, tip credits and other federal taxes. Every person who pays wages to one or more employees, or is required to file federal reports, must apply for a tax number. The IRS also provides a business tax kit and tax seminar for businesses. The seminar will provide you with basic instructions and forms. Sole proprietors, with no employees, may use their social security number in lieu of an EIN number. If you have guestions, please contact the IRS.

50 S. 200 E., Salt Lake City, Utah 84111

Phone: 1-800-829-1040

REGISTRATION OF A BUSINESS NAME / CORPORATIONS

All persons or partnerships doing business in Utah under an assumed business name must register with the Secretary of State. Corporations, LLC's, etc. must file articles and name registration. (Exceptions: Federally Chartered Banks, Sovereign Nations, & Insurance Agents)

Department of Commerce: Heber M. Wells Building

160 E. 300 S. Salt Lake City, Utah 84111

Phone: 801-530-4849

Cost: Corp. Filing Fee \$52.00 Registration of Name: \$22.00

STATE BUSINESS LICENSING

Under certain circumstances, a special state business license may be required for your business. Consult with The Utah Department Of Registration for more information. A state license does not exempt the business from obtaining a local business license.

Heber M. Wells Bldg.

160 E. 300 S., Salt Lake City, Utah 84111

Phone: 801-530-6628

FOR VEHICLE LICENSES, i.e.: DEALERS, AUTO BODY WORK, ETC. CONTACT THE UTAH STATE DIVISION OF MOTOR VEHICLE ENFORCEMENT.

210 N. 1950 W., Salt Lake City, Utah 84134

Phone: 801-297-2600

SALT LAKE COUNTY HEALTH DEPARTMENT

Salt Lake County Health Department has requirements for newly licensed and permitted establishments such as: Cosmetology, Day Cares, Massage, Tanning facilities, Hotels/Motels, Restaurants and other food and drink establishments. (Ownership changes are considered newly licensed & are required to be approved prior to beginning or continuing business). Please contact the Health Department for information.

788 E. Wood Oak Lane, Murray Utah 84107

Phone: Food Protection: 801-313-6620 (Restaurants, Bars, Food Services)
All Other Departments: 801-313-6641 (All Other Issues: Sanitation, Salons, Etc.)
Prepackaged Consumption Items: Contact The Dept. of Agriculture: 801-538-7124

SAFETY REGULATIONS

Contact the Dept. Of Occupational Safety and Health (UOSHA)

Heber M. Wells Bldg.

160 E. 300 S., Salt Lake City, Utah 84111

Phone: 801-530-6901

PROPERTY TAXES

Property taxes are levied on land, buildings & equipment used in a business. Please contact the Salt Lake County Treasurer for information.

2100 S. State Street, Salt Lake City, Utah 84190

Phone: 801-468-3050

UNEMPLOYMENT INSURANCE

Unemployment insurance, both state & federal, is generally required in firms with one or more employees. For information, contact the Department of Employment Security.

140 East 300 South, Salt Lake City, Utah 84145

Phone: 1-800-222-2857

WORKERS COMPENSATION FUND

Workers compensation insurance is required of <u>all</u> employers. This insurance may be obtained from private companies or The State Insurance Fund. For information, contact The Industrial Commission Workers Compensation Division. Businesses without employees may be required to complete an exclusion policy as well.

160 East 300 South, Salt Lake City, Utah 84111

Phone: 801-530-6800

MINIMUM WAGE LAW

Many businesses are subject to federal minimum wage, overtime and child labor law regulations. For information, contact the U.S. Department of Labor, Wage & Public Contracts Division.

Federal Bldg.

125 South State Street, Room #3420, Salt Lake City, Utah 84138

Phone: 801-524-5706

For businesses not under federal jurisdiction, please contact the Utah State Labor Division.

160 East 300 South, Salt Lake City, Utah 84111

Phone: 801-530-6801

ADDITIONAL RELATED PHONE NUMBERS:

801-892-6009
801-538-9288
801-530-6601
801-297-2600
801-977-6800

BCI (Background Investigations) 801-965-4445 3888 W 5400 S, West Valley City, Utah (FBI check)

Insurance Division 801-538-3800



Signature

BUSINESS LICENSE APPLICATION

Murray City Corporation 5025 South State Street #113 Murray, Utah 84157 (801) 264–2676

FOR OFFICE USE ONLY			
☐ New Account	☐ New Address		
☐ New Owner	☐ Update Only		
Control #			

		01) 264–2676	
Location Type: □ Residential □ Comm Ownership: □ Corporation □ LLC □ Partners *Corporations, LLC & Partnerships must provide a current Partners, Members & Directors.	hip □Sole Proprietor	Any remodeling at this business location Federal Tax ID # or SS# Utah Sales Tax # State License # & Type (if applicable)	
Business Name		DBA Name	
Business Address (Physical, no PO Box)		Zip Code	
		Projected Opening Date	
Mailing Address (if different)		Phone	
		()_	
Description of Business Activities (If Home Occup	ation, please indicate Home	Office Only, Details on Shipping/Storage	
After Hours Emergency Contact		Phone	
		()_	
Enter below name of owner, partner or local mana	ager if applicable. If more that	an one owner, partner or corporate officers pl	ease attach Owner/Corp. Officer list.
Owner Name	Title	Partner/Manager Name	
Home Address		Home Address	
City	State Zip	City	State Zip
Home Phone	Date of Birth	Home Phone	Date of Birth
Cell Phone	Drivers License #	Cell Phone	Drivers License #
Fee Amounts		******OFFICIAL	USE ONLY*****
Base Fee (\$100.00)	\$	APPR	OVALS
Home Occ. with affidavit (\$50.00 with annual gros	s revenue of		
less than \$10,000)	\$	☐ Hazardous Materials	□Fire
Regulatory Fees and type:	\$	Comments:	□Zoning
Employees: @ \$6.00 per employee	\$		□Code Enforcement
Vehicles: @ \$10.00 per vehicle	\$		□Health
Rental units: residential @ \$6.00 per unit			□DBA
commercial @ \$2.00 per unit	\$		□Other
Additional fees if applicable			
Total Fees due	*		
**Fees are non-refundable should license not be			
For Temporary/Seasonal License, please indicate	time frame (90 day Max)	to	
am aware that this application does not authorize conduct By signing below, I swear that the foregoing information is of licensee. Failure to receive notices does not excuse this	true and correct and is in accorda	ance with Murray City Ordinances. Responsibility of	of changes and renewal is total responsibility

Title

Date

OWNERS, OFFICERS AND MEMBERS INFORMATION LIST MURRAY CITY CORPORATION (BUSINESS LICENSE APPLICATION)

Please supply us with information on all Owners, Officers and Members associated with your business or include a preprinted list from your corporation.

Name	Title	
Home Address	Date of Birth	
City/State/Zip	Drivers License	State
Name	Title //	
Home Address	Date of Birth	
City/State/Zip	Drivers License	State
Name	 Title / /	
Home Address	Date of Birth	
City/State/Zip	Drivers License	State
Name	 Title / /	
Home Address	Date of Birth	
City/State/Zin	Drivers License	State

Business License Fee Schedule

Base License Fee: All businesses, excluding home occupations, are subject to a base license fee of one hundred dollars (\$100.00) plus six dollars (\$6.00) per employee and ten dollars (\$10.00) for each vehicle used in conjunction with your business.

Business License Regulatory Fees: The following regulatory fees are assessed in addition to all the base business license fees:

Alcohol beverage license fee schedule:		Home Occupations:	
- Off premises beer retailer license	\$200.00	- Businesses that had gross revenue of	
 On premises restaurant beer retailer (full or limited) 	\$500.00	\$10,000 or less in the prior calendar year. Must complete and sign a sworn affidavit annually.	\$50.00
- On premises banquet beer retail	\$500.00		
 On premises equity, fraternal, dining or social club beer retailer 	\$500.00	 Businesses that had gross revenue of more \$10,000 in the prior calendar year. 	\$100.00
- On premises tavern beer retailer	\$500.00	Hotel/Motel	\$250.00
 On premises nontavern beer retailer 	\$500.00	Pawnbroker	\$200.00
- Single event permit	\$100.00	Rental Units:	
- Temporary special event permit	\$150.00	- Residential	\$6.00 per
Amusement Device	\$150.00		unit
Auto Towing/Wrecking	\$150.00	- Commercial	\$2.00 per
Beauty/barber shop, nail salon, tanning salon, or other personal services	100.00	Secondhand Dealer	unit \$100.00
Childcare		Sexually oriented business and employee	
- Residential facility	\$175.00	license fee schedule:	
- License exempt residential user fee	\$50.00	Business:	
- Commercial center	\$150.00	- Adult business	\$500.00
Fireworks indoor/outdoor, Christmas tree sales	\$160.00	- Seminude entertainment bar	\$500.00
Group home and residential facility	\$250.00	- Outcall agency	\$1,000.00
Hazardous materials (care facility), hospital,		- Escort business	\$1,000.00
surgical facilities, outpatient care for		- Seminude entertainment agency	\$150.00
rehabilitation, skilled nursing care, long term care, assisted living. Similar businesses over the	\$350.00	Employee	
exempt amounts in the international fire code		- Seminude performers	\$250.00
		- Seminude entertainment,	
Hazardous Materials (storage, disposal, mixing,		nonperformers	\$150.00
dispensing, and use), including, but not limited		 Outcall agency, performers 	\$600.00
to, mobile paint, auto body repair, auto painting, on premises dry cleaning, printing shops, bulk		- Outcall agency, nonperformers	\$150.00
storage of hazardous materials, gases, oxygen		- Escort business, performers	\$600.00
and other processes, storage of paints, sealers,		- Escort business, nonperformers	\$150.00
enamels or oil based materials. Any other		Spa or Salon with licensed massage therapist	\$100.00
business using a hazardous material over the exempt amounts in the international fire code.	\$350.00	Storage Units	\$150.00
exempt amounts in the international file code.	φ350.00	Tattoo parlor	\$250.00
		Tobacco Retailer	\$200.00



MURRAY CITY CORPORATION POLICE DEPARTMENT

Dear Business Owner:

The Murray City Police Department continually strives to work effectively with the business community in Murray City. Towards this end, I would encourage you to complete the business responsible form enclosed with this letter.

The information provided on this form will enable the Police Department to contact you should there be a problem or emergency at your place of business. Valuable time will be saved in locating a responsible party to assist the police in answering questions or having someone respond. The multiple names listed will assist us in making contact should someone not be available.

Your cooperation in completing this form will help us to better serve you and your customers. The Murray City Police Department is committed to working with its citizens and business leaders to make Murray City a better and safer community.

Sincerely,

Peter A. Fondaco Chief of Police

Business Responsible Form

Murray City Police Department

Business Name:				
Address:				
Business Phone:				
Responsible Pa	rties			
Name:				
Phone:	Cell Phone:			
Name:				
Phone:	Cell Phone:			
Name:				
Phone:	Cell Phone:			
Alarm Company:				
	le this a home husiness?	VES	NO	

PLEASE RETURN THIS FORM WITH YOUR LICENSE RENEWAL.

MURRAY CITY FIRE DEPARTMENT BUSINESS INSPECTION INFORMATION LETTER ACCORDING TO THE INTERNATIONAL FIRE CODE

Welcome, new business owner, to the City of Murray. To assist your start-up and help things run a little smoother, here are a few things you can do.

If you are a home business doing telephone, computer or office-related work, or a kiosk, Murray City Fire does not require an inspection. *All* other businesses require a physical inspection of the business. If you are not sure about the requirements for your business, please contact our office for clarification.

Your business location must be occupied and set up, ready to do business, prior to inspection. We cannot inspect empty buildings.

*If your business is under construction or your anticipated start-up date is 10 days or more from the time you submit your business license application, please inform the Recorder's office and indicate the date you would like to open on your application.

Please be aware that a business license cannot be issued without necessary approvals and inspections being completed.

Remember!

You must submit your business license application to the City Recorder's office before an inspection can be set up.

Our Fire Inspectors will call you 24 to 48 hours after receiving your application to set up an inspection time.

Fire Marshal's Office

For more information or questions call,

Phone: Russ Groves Office, (801) 264-2775, Mobile, (801) 856-7550

George Zboril Office, (801) 264-2773, Mobile, (801) 856-2616 Phil Roberts Office, (801) 264-2776, Mobile, (801) 792-5301

Main Fire Department Office, (801) 264-2781

Business Name:	
Δ.Ι.Ι	
Address:	
Signature:	

Please complete and return *top* copy along with Business License Application

2nd copy and checklist is for licensee information only. It is not required to be turned in to the fire or licensing departments.

MURRAY CITY FIRE DEPARTMENT BUSINESS INSPECTION INFORMATION LETTER ACCORDING TO THE INTERNATIONAL FIRE CODE

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Address:	
Signature:	

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EXITS

IFC 1003.6	Obstructions shall not be placed in the width of the means of egress.
IFC 1008.1.9.3	Exit doors shall remain unlocked when the business is occupied. (2.2)
IFC 315.2.2	Mean of egress. Combustible materials shall not be stored in exits or exit enclosures.
	FIRE EXTINGUISHERS
IFC 906.1 thru	Minimum Rating 2A:10BC - 1500 Square Feet, Serviced annually Mounted not more than 5' above floor and no closer than 4". Extinguishers shall be accessible. Type K for deep fat fryers.
	FIRE PROTECTION SYSTEMS
IFC 901.6	Fire detection, alarm and extinguishing systems shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. <i>Non- required fire protection systems and equipment shall be inspected</i> , tested and maintained or removed.
IFC 903.3.1.1	Sprinkler systems shall be installed throughout the premises. Including under stairs and closets.
IFC 906.3.4	All valves controlling the water supply for automatic sprinkler systems pumps, tanks, water levels and temperatures, critical air pressures and water flow switches on all sprinkler systems shall be electrically supervised by a listed fire alarm control unit.
NFPA 25, 12.7	Fire department connection (FDC) caps in place and swivels work freely. FDC and indicating valve painted.
IFC 315.2.1	Storage shall be maintained 18" below sprinkler heads, or 24" below the ceiling in non-sprinkled buildings.
	FIRE ALARM SYSTEMS
IFC 907.7 and NFPA 72	All fire alarm system shall be installed, inspected, repaired and serviced According to the requirements of NFPA 72 Fire Alarm Code and the International Fire Code.
IFC 907.6.2.3.1	Visible alarm notification appliances shall be provided in public areas, common areas.

IFC 907.6.2.3.2		Where employee work areas have audible alarm coverage, the
		wiring system shall be designed so that visible alarm notification appliances can be integrated into the alarm system.
IFC 907.10.2		Audible alarms. Audible alarms notification appliances shall be
		provided and emit a distinctive sound that is not to be used for any purpose other than that of the fire alarm.
IFC 907.9.5		The building owner shall be responsible for ensuring that the fire and
		life safety systems are maintained in an operable condition at all times. Repairs shall be made by a certified fire alarm systems technician.
	_	MECHANICAL
IFC 3.15.2.3		Combustible materials shall not be stored in boiler rooms, mechanical
		rooms or electrical equipment rooms.
IFC 312.1		Gas meter shall protected and accessible.
		ELECTRICAL
IFC 605.6		Open junction boxes and open- wiring splices shall be prohibited.
		Approved covers shall be provided for all switch and electrical outlet boxes.
IFC 605.5		Extension cords may not be used as a substitute for permanent wiring.
		Extension cords and flexible cords shall not be affixed to structures, extend through walls, ceilings, floors, under doors or floor coverings.
IFC 605.3		Main electrical panels require a minimum clearance of 30".
		HOUSEKEEPING
IFC 3003.3.3		All compressed gas cylinders in service or storage shall be secured.
IFC 304.3.3		Dumpsters shall not be placed within 5' of combustible walls, openings
		or combustible roof eave lines (25' for schools)
IFC 315.3.2		Boiler rooms, mechanical rooms, and electrical panel rooms shall not be used for storage of combustibles.
IBC 1009.6.3		No storage under stairs unless protected by 1-hour fire resistive
		construction (5/8" sheet rock), or fire sprinkled.

INDUSTRIAL DISCHARGE QUESTIONNAIRE

New Business Form \square **Renewal Form** \square

Name of Business	
Property Address (street,city,zip)	
Mailing Address (street,city,zip)	
Company Official (name)	
Company Official (title)	(phone #)
Facility is: Owned Leased Home Business Other	
Brief description of business, products produced, services provided, etc	
Standard Industrial Classification Code (SIC) () [if k	nown]
3. Average Number of Employees: Day Afternoon	Night Total_
4. Check Types of Wastewater Discharges	
Sanitary wastes (rest rooms) Non-contact Cooling Water Contact Cooling W	'ater □ Equipment Wash Down □ Boiler Blowdown □
Process Wastes (List Types)	
Other discharges	
5. List Expected Daily Water Use (Gallons Per Day)	
6. Are any of your process discharges regulated by Federal Categorical Discharge Star	ndards? Yes □ No □
<u>If yes</u> , list Standards: (Code of Federal Regulations)	
7. Will chemicals be used or stored on site? Yes \square No \square	
<u>If yes</u> , list chemicals that will be on site in quantities of 55 gallons or more on the ba	ack of this form.
8. Will hazardous waste be generated at this facility? Yes \hdots No \hdots	
<u>If ves</u> , list types on the back of this form.	
I have personally examined and am familiar with the information submitted in this repo	ort and any attachments. Based on my inquiry of those
individuals immediately responsible for obtaining the information reported herein, I be	lieve that the information reported herein, I believe that the
submitted information is true, accurate, and complete. I am aware that there are signifi-	cant penalties for submitting false information, including the
possibility of fines and imprisonment.	
Signature	<u>D</u> ate
(CENTRAL VALLEY USE C	ONLY)
Classification	Grease, Oil, or Sand Interceptor Required Yes No
Reviewed by (MEC)	Date
Reviewed by (CVS)	Date
Reviewed by (CVS)	Date

(OVER)

CHEMICALS USED

CHEMICAL NAME	AMOUNT STORED	AMOUNT USED

HAZARDOUS WASTES

NAME	EXPECTED MONTHLY GENERATION QUANTITY	DISPOSAL METHOD